O.P.E. 4288

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Request

for

Continued Examination (RCE)

**Transmittal** 

Address to:

Mail Stop RCE

**Commissioner for Patents** 

P. O Box 1450

Alexandria, VA 22313-1450

**Application Number** 

Filing Date

First Named Inventor

Art Unit

**Examiner Name** 

Attorney Docket Number

09/889.326

with an effective filing date of

January 7, 2000

**Gerhard HARTWICH** 

1637

Heather Calamita

PATKRI P02AUS

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to e submitted to the USPTO) on page 2.

une 8, 1	1995, or to any design application. See Instruction Sheet for RC	CEs (not to e submitted to the USPTO) on page 2.					
f applica	ant does not wish to have any previously filed unentered ame	RCE is proper, any previously filed unentered amendments and er in which they were filed unless applicant instructs otherwise. ndment(s) entered, applicant must request non-entry of such					
	<ul> <li>a. Previously submitted. If a final Office action is outstand considered as a submission even if this box is not checket</li> </ul>	ding, any amendments filed after the final Office action may be d.					
	i.   Consider the arguments in the Appeal Brief or	Reply Brief previously filed on					
	ii.   Other: Please consider the Response filed on	July 31, 2006.					
	b. □ Enclosed						
	i. □ Amendment/Reply	iii. □ Information Disclosure Statement (IDS)					
	ii. □ Affidavit(s)/Declaration(s)	iv. □ Other					
2.	Miscellaneous						
	<ul> <li>a.</li></ul>						
	b. <b>I</b> Other						

- 3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.
  - a. 

    The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments to Deposit Account No. 04-0213. I HAVE ENCLOSED A DUPLICATE COPY OF THIS SHEET.
    - i. RCE fee required under 37 CFR 1.17(e)
    - ii. 

      Extension of time fee (37 CFR 1.136 and 1.17)
    - iii. 

      Other\_\_\_\_\_\_
  - b. Check in the amount of \$395.00 is enclosed.
  - c. 

    Payment by credit card (Form PTO-2038 enclosed)

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Signature: Signature OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Date: August 22, 2006

Registration No.: 32,018

## CERTIFICATE OF MAILING OR TRANSMISSION

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Signature: Michael J. Bufold

Date: August 22, 2006

08/25/2006 MWDLDGE1 00000048 09889326

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PTO/SB/21 (12-97)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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		Application Number	09/889,326					
<b>TRANSMI</b>	TTAL	Filing Date	with an effec	tive filing date of January 7, 2000				
#ORN		First Named Inventor	Gerhard HAR	тwісн				
AUG 2 4 2006 (to be used forcill correspon	dence after initial	Group Art Unit	1634					
Afiling)		Examiner Name	Heather Calai	mita Fax: (571) 273-8300				
Total No. of Pages in this Su	ıbmission: 3	Attorney Docket Number	PATKRI PO2A	AUS				
ENCLOSURES (check all that apply)								
■ Fee Transmittal Form		☐ Assignment papers (for an Application)		☐ After Allowance Communication to Group				
- ■ Fee attached		☐ Drawing(s)		☐ Appeal Communication to Board				
☐ Amendment/Response	•	☐ Licensing-related Papers		of Appeals and Interferences				
□ After Final		☐ Petition Routing Slip (PT(	O/SB/69)	☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)				
☐ Affidavits/dec	claration(s)	and Accompanying Petiti (DELETED - no long	on	☐ Proprietary Information				
☐ Extension of Time Rec (in Duplicate)	quest	☐ To Convert a Provisional	Petition	☐ Status Letter				
☐ Express Abandonment	t Request	☐ Power of Attorney, Revocation Change of Correspondence Address		Additional Enclosure(s) (please identify below):				
☐ Information Disclosure Statement		☐ Terminal Disclaimer		Return Receipt Postcard				
☐ Certified Copy of Priority Document(s)		☐ Small Entity Statement		Request for Continued Exam				
☐ Response to Missing F Incomplete Application		☐ Request for Refund	r Refund					
<ul><li>Response to I under 37 CFR</li></ul>	Missing Parts 1.52 or 1.53							
REMARKS								
	SIGNA	ATURE OF APPLICANT, ATTO	RNEY, OR AGE	NT				
Firm or Individual Name	D. N. 2001							
Signature	$\sqrt{2}$							
Date								
	<u> </u>	CERTIFICATE OF MAI	LING					
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Type or printed name	Michael J. Bujold							
Signature	and	1 Dente		Date: August 22, 2006 (cmp)				

PTO/SB/17 (07-06)
Approved for use through 01/31/2007. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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Effective on 12/08/2004. Personant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL AUG 2 4 2006 For FY 2006 POI F I 2000
 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT: \$395.00

Complete if Known

Application No. Filing Date
First Named Inventor **Examiner Name** Art Unit

09/889,326 with an effective filing date of January 7, 2000 Gerhard HARTWICH Heather Calamita 1634

Attorney Docket No.

PATKRI P02AUS

METHOL	O OF PAYMENT (check all th	ат аррту)								
■ Check □ Credit Card □Money Order □None □ Other (please identify):										
■ Depos	sit Account Deposit	Account Nu	ımber <u></u>	04-0213	_	Deposit Account N	lame: <u>DAVI</u>	S & BUJOL	D, P.L.L	C
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
	☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below except for the filing fee									
	■ Charge any additional fee(s) or underpayments of fee(s) ■ Credit any overpayments under 37 CFR 1.16 and 1.17									
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	_CULATION	-2030.								
T LL CAL	COLATION									
1.	BASIC FILING, SEARCH, AND EXAMINATION FEES									
		FILING FI	FILING FEES SEA		SEARCH	EARCH FEES EXAMINATI		TION FEES	S	
	Application Type	Fee (\$)	Small Er Fee (\$		Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (4)	<u>Y</u>	Fees Paid (\$)
	Utility	300	150		500	250	200	100		
	Design	200	100		100	50	130	65		
	Plant	200	100		300	150	160	80		
	Reissue	300	150		500	250	600	300		
	Provisional	200	100		0	0	0	0		
2.	EXCESS CLAIM FEES Fee Description Each claim over 20 (includin	ng Reissues)	)				Fee (\$) 50	_	mall Ent Fee (\$) 25	ity —
	Each independent claim over	ach independent claim over 3 (including Reissues) 200					1	00		
Multiple dependent claims 360						1	80			
	Total Claims -20 or HP =	Extra Clai	<u>ms</u> x	Fee (\$)	=	Fee Paid (\$)	!	Multiple De Fee (\$)	pendent	<u>Claims</u> Fee Paid (\$)
	Indep. Claims3 or HP + HP = highest number of inde	Extra Clai	x	Fee (\$)	=	Fee Paid (\$)			_	
3.	APPLICATION SIZE FEE If the specification and drawi the application size fee due 37 CFR 1.16(s).	nas exceed 1	100 sheet	ts of paper (	(excludina e	electronically filed s Iditional 50 sheets	equence or o	computer lis hereof. Se	stings und e 35 U.S	der 37 CFR 1.52(e)), i.C. 41(a)(1)(G) and
	<u>Total Sheets</u> -100 =	Extra She	<u>ets</u> / 50 =	No. of ea	ch addition (ro	a I 50 or fraction thound up to a whole	<u>ereof</u> number) x _	Fee (\$)=		Fee Paid (\$)
4.	OTHER FEE(S) Non-English Specification,									Fees Paid (\$)
Other (e.g., late filing surcharge) Request for Continued Examination (Small Entity) \$395.00								\$395.00		
SUBMITTED BY										
Signature Aula Baff						3) 226-7490				
Name (Print/Typ		J. Bujold	[]]			Registration No. (Atty/Agent) 32	,018	Date:	August	22, 2006